

Wesleyan Roundtable Event

The rise of the portfolio career:

What it means for medical professionals
and their patients

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The way doctors work is changing.

Growing numbers of General Practitioners (GPs) and hospital doctors are finding that a career focused purely on clinical work can be physically and emotionally exhausting, putting them at risk of burnout.

Augmenting their core role with additional responsibilities can reignite their passion for the profession, enabling them to apply all their skills, boosting their earning potential and extending their careers.

Today, it's not uncommon for a doctor to work in their GP surgery or hospital for a couple of days a week and use the rest of their time on teaching, research, clinical leadership, public health initiatives, police work or freelance consultancy.

Indeed, there is a wealth of opportunity for doctors to apply their skills across a diverse and rewarding range of work.

And there is a view that in many cases these different roles can feed into and enhance each other, making for better doctors and better outcomes for patients.

Given the well-reported workload pressures on medics, it is easy to see the appeal of a portfolio career.

A recent British Medical Association survey of GP trainees, for example, found that the pressures of their clinical work mean nearly three quarters are already experiencing burnout.*

So, does this trend reflect underpayment for professional medical services and a lack of job satisfaction in the modern NHS, that is causing people to look outside of the profession?

And could portfolio careers be the answer to the burnout issue, aiding staff retention and supporting their ability to provide the highest level of care?

Either way, could this new way of working be embedded in a contractual form, with extra professional activities built into rotas, working contracts and job plans?

As things stand, support for portfolio careers among hospitals and GP practices can vary; while some doctors have experienced support and encouragement, others have come up against objections.

But there is another argument; that accepting portfolio working as the 'new normal' will only encourage an exodus of doctors from full-time NHS work, reducing capacity and further jeopardising an already under-resourced health service.

Against this backdrop, we wanted to understand the experiences of those on the front line, so we commissioned a survey of 200 UK doctors, around half of whom have portfolio careers.

And we convened a roundtable including medics from our Members Advisory Board to consider the results and discuss the topic more broadly, asking key questions including:

- ▶ What does the portfolio career doctor look like today?
- ▶ What are the advantages of portfolio careers for doctors, patients and the NHS?
- ▶ What are the disadvantages of portfolio careers for doctors, patients and the NHS?
- ▶ How can the NHS evolve and adapt to support doctors with portfolio careers?

With a new government that is committed to reform, we hope that the quantitative and qualitative research in this report can add to the academic lexicon, helping stimulate a broader discussion about how portfolio careers can positively impact service delivery in the NHS.

Find out more and explore our in-depth report on portfolio careers, to see what they mean for medical professionals and their patients.

Read the full report

www.wesleyan.co.uk/pulse-portfolio-careers

*<https://www.bma.org.uk/bma-media-centre/new-bma-survey-highlights-worrying-trends-of-burnout-and-future-concerns-from-gp-registrars>